

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (FOR INTEL CORPORATION PATENT APPLICATIONS)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below, next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

NETWORK DEDICATION SYSTEM

	X	is attached hereto.		
		was filed on	as	
		United States Application Nu		
a c:		or PCT International Applica	tion Number	
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hereby	state that I have reviewed an	nd understand the contents of th	e above-identified specificati	ion, including the claim(s), as
amended	by any amendment referred	d to above. I do not know and d	o not believe that the claimed	d invention was ever known or
laused in the	ne United States of America	a before my invention thereof, or	patented or described in any	y printed publication in any
_country t	efore my invention thereof	or more than one year prior to t	his application, that the same	was not in public use or on
sale in th	e United States of America	more than one year prior to this tificate issued before the date of	tappincation, and that the inv	try foreign to the United States
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APPLICATION NUMBER

FILING DATE

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

APPLICATION NUMBER	FILING DATE	STATUS (ISSUED, PENDING, ABANDONED)

I hereby appoint the persons listed on Appendix A hereto (which is incorporated by reference and a part of this document) as my respective patent attorneys and patent agents, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith.

Charles A Mirho Dea No Al 100 RIAKHIY SOKOLOHH IAYIOR &		
Charles A. Mirho, Reg. No. 41,199, BLAKELY, SOKOLOFF, TAYLOR &	ZAFMAN, LLP	
Name of Attorney or Agent)	11.4.	
2400 Wilshire Boulevard, 7th Floor, Los Angeles, California 90025 and di	rect telephone calls to:	
<u>Charles A. Mirho,</u> (503) 684-6200.		
(Name of Attorney or Agent)		
Thereby declare that all statements made herein of my own knowledge are tr	ue and that all statements ma	ide on information and
belief are believed to be true; and further that these statements were made w	ith the knowledge that willfu	l false statements and
the like so made are punishable by fine or imprisonment, or both, under Sec	tion 1001 of Title 18 of the U	Inited States Code and
that such willful false statements may jeopardize the validity of the application	on or any patent issued there	on.
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	Storion F	Davila
Full Name of Sole/First Inventor (given name, family name)	Steven E	. Barile
		. Barile
Full Name of Sole/First Inventor (given name, family name)	Steven E. Date	. Barile
Full Name of Sole/First Inventor (given name, family name)		. Barile
Full Name of Sole/First Inventor (given name, family name) inventor's Signature	Date	. Barile
Full Name of Sole/First Inventor (given name, family name) Inventor's Signature Residence		
Full Name of Sole/First Inventor (given name, family name) inventor's Signature	Date	(Country)
Inventor's Signature Residence (City, State)	Date	
Full Name of Sole/First Inventor (given name, family name) Inventor's Signature Residence	Date	
Inventor's Signature Residence (City, State)	Date	
Inventor's Signature Residence (City, State)	Date	



Bradford H. Needham Full Name of Second/Joint Inventor (given name, family name) Inventor's Signature Date ____ Citizenship ____ Residence (City, State) (Country) Mailing Address Full Name of Third/Joint Inventor (given name, family name) Inventor's Signature Date Citizenship (Country) Residence (City, State) 1] Mailing Address Full Name of Fourth/Joint Inventor (given name, family name) Inventor's Signature _____ Date _____ Residence (City, State) Citizenship (Country) Mailing Address Full Name of Fifth/Joint Inventor (given name, family name) Inventor's Signature Date _____ Citizenship _____ Residence (City, State) Mailing Address

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Full Name of Tenth/Joint Inventor (given name, family name)			
Inventor's Signature	Date		
Residence	Citizenship		
(City, State)		(Country)	
P. O. Address			
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Inventor's Signature	Date		
Residence	Citizenship		
(City , State)		(Country)	
Mailing Address			
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